FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



03000958

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Year

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2

☑ Actual

☐ Estimated

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| 1213924 |
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| 0140 40000(4) |

OMB APPROVAL

3235-0076 OMB Number:

Prefix

Expires:...December 31, 1996 Estimated average burden

hours per response 16.00

SEC USE ONLY

Serial

| U3000958 | SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTI | ON DATE RECEIVED |
|--|---|---|
| Name of Offering (check if this is an a | mendment and name has changed, and indicate change.) | 10 10 20 D |
| Offering of Class A Limited Lial | oility Units | JAN 0 2002 |
| Filing Under (Check box(es) that apply): Type of Filing: ☑ New Filing □ | ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 Amendment | Section 4(6) ULOE |
| | A. BASIC IDENTIFICATION DATA | 165/69 |
| 1. Enter the information requested about t | he issuer | |
| Name of Issuer (check if this is an ame | endment and name has changed, and indicate change.) | |
| Paradise On The One, LLC | | |
| Address of Executive Offices | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| c/o Arpad Productions, Inc., 375 New York 10013 | Greenwich Street, Suite 713, New York, | (212) 941-3858 |
| Address of Principal Business Operations (if different from Executive Offices) | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| Brief Description of Business | | |
| The LLC was formed to finance, motion pircture entitled "Paradi | develop, produce, distribute and exploit for esseOn the One". | exhibition to worldwide audiences a |
| Type of Business Organization | | |
| □ corporation | □limited partnership, already formed | ☑ other (please specify): |
| ☐ business trust | ☐ limited partnership, to be formed | limited liability company, already formed |
| | W. A. W | DDOORGO |

GENERAL INSTRUCTIONS

Federal:

Jurisdiction of Incorporation or Organization:

Actual or Estimated Date of Incorporation or Organization:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

Month

1

1

(Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

| | | of corporate issuers and of of partnership issuers. | corporate general and ma | naging partners of | fpartne | rship issuers; and |
|----------------------------|------------------|---|--------------------------|---|---------|------------------------------------|
| Check Box(es) that Apply: | ☑ Promoter | ☑ Beneficial Owner | ☑ Executive Officer | ☑ Director | Ø | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | | | |
| Lengyel, Peter E. | 01 1 | 0. 0. 0. 0. 0. | | | | |
| Business or Residence Addi | • | • | • | 37I- 10012 | | |
| Arpad Productions, | | | | | | C11/ |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | | | |
| Business or Residence Addr | ress (Number and | Street, City, State, Zip Cod | le) | | •• | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner □ | Executive Officer | ☑ Director | | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | | | |
| Business or Residence Addr | ress (Number and | Street, City, State, Zip Cod | le) | | | |
| Check Box(es) that Apply: | □ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | □Director | | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | | _ | |
| Business or Residence Add | ress (Number and | Street, City, State, Zip Cod | le) | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | () () () () () () () () () () | | |
| Business or Residence Add | ress (Number and | Street, City, State, Zip Cod | le) | | | · |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | | | |
| Business or Residence Add | ress (Number and | Street, City, State, Zip Cod | le) | | | |
| Check Box(es) that Apply: | ☐ Promoter | ☐ Beneficial Owner | □Executive Officer | ☐ Director | | General and/or Managing Partner |
| Full Name (Last name first | , if individual) | | | | | |

Business or Residence Address (Number and Street, City, State, Zip Code)

| ndividual) | | | | | Managing Partner |
|---------------|--|---------------------|--|----------|------------------------------------|
| idividual) | | | | | |
| (Number and S | treet, City, State, Zip Cod- | e) | | | |
| Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | | General and/or Managing Partner |
| ndividual) | | | | | |
| (Number and S | treet, City, State, Zip Code | e) | | | |
| Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | | General and/or Managing Partner |
| ndividual) | | | | | |
| | Promoter Individual) (Number and S Promoter | Promoter | (Number and Street, City, State, Zip Code) Promoter | Promoter | Promoter |

| | | | | B. IN | FORMAT | ION ABO | UT OFFE | RING | | | | | |
|----------------------------------|---|----------------------------|---|--|---|--|---------------------------|---|-----------------------------|---|-------------------|--------------|---------|
| . Has the | issuer sald | or does th | e issuer i nt e | end to sell | to non-acct | edited inve | stars in this | affering? | | | | | No ☑ |
| . 1145 (116 | 100001 5010 | , or doe s in | | | | ix, Column | | | | | | _ | _ |
| . What is | the minim | um investm | | | • • | - | • | | | | \$2 | 5,000 | |
| . What is | THE HAIMIN | ani mvesim | ioni mai wi | ii oo accepi | ca noman | y marriada. | | • | | | | Yes 1 | No |
| | | | | | | | | | | | | \square | |
| or simi listed is of the b | lar remuner s an associa proker or de | ation for so | olicitation of or agent of ore than fiv | of purchased a broker of e (5) perso | rs in conne dealer reg ns to be lis | ction with s istered with ted are asso | sales of sec the SEC a | curities in the nd/or with | ne offering a state or s | y, any comi . If a perso tates, list th or dealer, y | n to be e name | | _ |
| ull Name (| Last name t | first, if indiv | vidual) | | | | | | | | | | |
| Business or | Residence . | Address (N | umber and | Street, City | , State, Zip | Code) | | | | | <u> </u> | | |
| lame of As | sociated Br | oker or Dea | ıler | | | | | | | | | | |
| | | Listed Has | | | | | | | | | | All Sta | ates |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID | |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MC |)] |
| [MT] [RI] | [NE] [SC] | [NV] [SD] | [NH] [TN] | [NJ] [TX] | [NM] [UT] | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA [PR | _ |
| | | first, if indiv | | - | | | | | | | | | |
| lusiness or | Residence . | Address (N | umber and | Street, City | , State, Zip | Code) | | | | | | | |
| lame of As | sociated Br | oker or Dea | ler | | | | | | | | | | |
| | | Listed Has tates" or ch | | | | | | | | | | All Sta | ates |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID |] |
| | | [IA] | | | | | | | | [MN] | | | |
| [MT] [RI] | [NE] [SC] | [NV] [SD] | [NH] [TN] | [NJ] [TX] | [NM] [UT] | [NY] [VT] | [NC] [VA] | [ND] [WA] | [OH] [WV] | [OK] [WI] | [OR] [WY] | [PA [PR | - |
| | | first, if indiv | | [***] | [01] | [,,] | [, , ,] | | f ., .] | [] | ['' 1] | [11 | |
| | | | | | * | | | | | | | | |
| usiness or | Residence . | Address (N | umber and | Street, City | , State, Zip | Code) | | | | | | | |
| lame of As | sociated Br | oker or Dea | aler | | | | | | - | | | | |
| | | Listed Has tates" or ch | | | | | | .,,*** | | | | All Sta | ate |
| [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID | |
| [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MC | _ |
| [MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA | |
| [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | ſ WI l | [WY] | ſ PR | : 1 |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE | OF PROCEEDS | |
|--|-----------------------------|--------------------------------------|
| Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | |
| Type of Security | Aggregate Offering Price | Amount Already Sold |
| Debt | \$ | . \$ |
| Equity | \$ | \$ |
| □ Common □ Preferred | | |
| Convertible Securities (including warrants) | \$ | . \$ |
| Partnership Interests | \$ | \$ |
| Other (Specify Class A Limited Liability Units | \$5,000,000.00 | \$ <u>75,000.00</u> |
| Total | \$5,000,000.00 | \$ <u>75,000.00</u> |
| Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | |
| | Number Investors | Aggregate Dollar Amount of Purchases |
| Accredited Investors | 2 | \$ <u>75,000.00</u> |
| Non-accredited Investors | 0 | s <u> </u> |
| Total (for filings under Rule 504 only) | 0 | \$ <u>n/a</u> |
| Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. | | |
| Type of Offering | Type of Security | Dollar Amount Sold |
| Rule 505 | | \$ |
| Regulation A | | \$ |
| Rule 504 | | \$ |
| Total | | \$ |
| 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| Transfer Agent's Fees | | □ \$ |
| Printing and Engraving Costs | | ☑ \$ <u>4,000.00</u> |
| Legal Fees | •••••••• | ☑ \$ <u>25,000.00</u> |
| | | |
| Accounting Fees | ••••••••••• | ☑ \$ <u>1,000.00</u> |

| Other Expenses (Specify | □ \$ 0 |
|-------------------------|----------------------|
| • | |
| Total | ☑ \$30,000.00 |

| | C. OFFERING PRICE, NUMBER | OF INVESTORS, EXPENSES AND USE | OF | PROCE | EDS | |
|-----|---|--|------|--------------------------------------|--------------|-----------------------|
| | b. Enter the difference between the aggregate offering p and total expenses furnished in response to Part C - Q gross proceeds to the issuer." | uestion 4.a. This difference is the "adjusted | | | 5 <u>4</u> | .970.000.QQ |
| 5. | Indicate below the amount of the adjusted gross proceeds each of the purposes shown. If the amount for any purchase the box to the left of the estimate. The total of gross proceeds to the issuer set form in response to Part C | rpose is not known, furnish an estimate and the payments listed must equal the adjusted | | | | |
| | • | • | | Payments Officer Directors Affiliate | ъ, ь, & | Payments To Others |
| | a. Salaries and fees | omenia de la compania del compania del compania de la compania del la compania de la compania dela compania del la compania de la compania de la compania dela compania del la compania de | | S | □ | S |
| | b. Purchase of real estate | | | S | 🗆 | \$ |
| | c. Purchase, rental or leasing and installation of machine | ry and equipment | | \$ | | \$ |
| | d. Construction or leasing of plant buildings and facilitie | \$ | | \$ | | 5 |
| | e. Acquisition of other businesses (including the value of be used in exchange for the assets or securities of another | | | \$ | | 5 |
| | f. Repayment of indebtedness | | | \$ | | \$ |
| | g. Working capital | | | 5 | Ø | 5 <u>4.970.000.00</u> |
| | h. Other (specify): | | | 5 | | \$ |
| | | | _ | mt . | F-4 | m |
| | a. | | | | | \$ |
| | Celumn Totals | | | | | |
| | Total Payments Listed (column totals added) | , , , , , , , , , , , , , , , , , , , | | 图 | \$4,970,00 | 7 <u>07</u> |
| | | | | | | |
| | D. | FEDERAL SIGNATURE | _ | | | |
| The | issuer has duly caused this notice to be signed by the un- | | ce i | is filed un | der Rule 50 | 5 the following |
| sig | nature constitutes an undertaking by the issuer to furnish to formation rutnished by the issuer to any non-accredited inv | to the U.S. Securities and Exchange Commiss | ion | , upon wr | itten reques | t of its staff, the |
| Iss | uer (Print or Type) | Signature \ | | | Date Janua | ry 6,2003 |
| | radise On The One, LLC | | | | | |
| | - ' ' | Title of Signer (Print or Type) | | | | |
| Pe | ter E. Lengyel | President of Arpad Productions, I | nc | ., Sole | Manage | r |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | | e. State signature | | | |
|-----|---|--|----------------------|-----------|------------|
| 1. | Is any party described in 17 CFR 230.252(c), disqualification provisions of such rule? No | | ny of the | Yes | No |
| | See Appen | dix, Column 5, for state response. | | | |
| 2. | The undersigned issuer hereby undertakes to filed, a notice on Ferm D (17 CFR 239.500) | | | this no | otice is |
| 3. | The undersigned issuer hereby undertakes to furnished by the issuer to offerees. | furnish to the state administrators, u | pon written reques | st, infor | mation |
| 4. | The undersigned issuer represents that the issuer Uniform Limited Offering Exemption (Unissuer claiming the availability of this exemple satisfied. | LOE) of the state in which this notic | e is filed and unde | rstands | that the |
| | ne issuer has read this notification and knows th half by the undersigned duly authorized person | | aused this notice to | be sig | ned on its |
| Iss | uer (Print or Type) | Signature | Date | January | 6,2003 |
| | aradise On The One, LLC | U | | | |
| | , , , , | Title (Print or Type) | \ | | |
| Pe | eter E. Lengyel | President of Arpad Production | s, Inc., Sole Ma | aager | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.